PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pape Work Reduct	ion Act of 199	5 no persons are required to	respond to a collection of	of infor	nation unless it displ	ays a valid OMB control number						
Effect ant to the Consolid			Complete if Known									
	Application Number		09/778,474									
FEE TR	Filing Date		February 7, 2001									
Fo	First Named Inventor		Nelson et al.									
Applicant claims small	Examiner Name		Saba Tsegaye									
	Art Unit		2419									
TOTAL AMOUNT OF PAY	Attorney Docket N	No.	TAN-2-1495.01	.US								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Comm. Corp.												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s)												
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCULATION	011 F 10-2030	·			******							
1. BASIC FILING, SEAF	RCH AND	EYAMINATION FEES										
i. DAGIG HEIRO, GEA	FILING	FEES SEA	RCH FEES	EXAN	INATION FEES	3						
Application Type	Fee (\$)	Small Entity Fee (\$) <u>Fee (</u>	Small Entity \$) Fee (\$)	Fee	(\$) Small Entity (\$) Fee (\$)	Fees Paid (\$)						
Utility	330	165 540	270	220								
Design	220	110 100	50	140	*							
Plant	220	110 330	165	170	, ,							
Reissue	330	165 540	270	650	00							
Provisional	220	110 0	0	C								
2. EXCESS CLAIM FEI	ES				_	Small Entity						
Fee Description	inaludina D	(aiaguas)			<u>Fee (\$)</u> 52	<u>Fee (\$)</u> 26						
Each claim over 20 () Each independent cla					220	110						
Multiple dependent c	390	195										
Total Claims	Extra Clair	ms Fee (\$) Fe	e Paid (\$)		Multiple Dependent Claims							
- 20 or HP =			0		Fee (\$)	Fee Paid (\$)						
HP = highest number of tota Indep. Claims		•	e Paid (\$)									
3 or HP =		x = _	0									
HP = highest number of inde	•	s paid for, if greater than 3.										
APPLICATION SIZE If the specification and	FEE drawings	exceed 100 sheets of p	ner (excluding ele	ectron	ically filed segu	ience or computer						
), the application size f										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
100 = / 50 = (round up to a whole number) x =												
Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)												
		Request for Continued	•			\$810						
	H											

SUBMITTED BY Registration No. (Attorney/Agent) 57,204 Telephone 215-568-6400 Signature Name (Print/Type) Robert D. Leonard Date December 12, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-08)

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Effective 2/08/2004. Fees pursuant to the def Appropriations Act, 2005 (H.R. 4818).					Complete if Known								
				Applic	Application Number 09/778		474						
FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27					Filing Date Februa		/ 7, 2001						
					amed Inventor	Nelson et							
					Examiner Name Saba		Tsegaye						
Applicant cla	ims small entity s	T Set	9 37 CFR 1.27	Art Un	Art Unit 2419								
TOTAL AMOUNT OF PAYMENT (\$) 810					ey Docket No.	TAN-2-14	195.01.US						
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Comm. Corp.													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
l	Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below												
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.													
FEE CALCULA			· · · · · · · · · · · · · · · · · · ·										
		ND EXA	MINATION FEES					 					
		ING FEES	S SEA	ARCH FE		MINATION							
Application T	ype <u>Fee</u>		Entity (\$) Fee		Entity (\$) Fed		Entity (\$)	Fees Paid (\$)					
Utility	330												
Design	220)	0 100) 5	io · 14	0 7	0 -						
Plant	220) 11	0 330) 16	5 17	0 8	5 _						
Reissue	330) 16	5 540) 27	0 65	30 32	.5 _						
Provisional	220) 11	0 ·)	0	0	0 -						
Fee Description	2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$) 52 26												
Each indepe	ndent claim ove		iding Reissues)				220	110					
	endent claims		390	195									
Total Claims	<u>Extra</u> :0 or HP =	<u>Claims</u> x	-	ee Paid (\$	D.		Multiple Dependent Claims Fee (\$) Fee Paid (\$)						
	nber of total claims				-	2	<u> </u>	10010101					
	Extra		Fee (\$)	ee Paid (\$	1								
	or HP = ber of independent	claims paid	for, if greater than 3.	0	-								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer													
listings un	der 37 CFR 1.5	2(e)), the	application size	fee due is	s \$270 (\$135 f								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)													
Jotal Offeet	100 =		50 =		up to a whole r			_=					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)													
Other (e.g., late filing surcharge): Request for Continued Examination (RCE) \$810													
SUBMITTED BY		7		Registra	ition No		Telephone	E 560 6400					
(Attorney/Agent)							Telephone 215-568-6400 Date December 12, 2008						
lame (Print/Type) Robert D. Leonard Date December 1:							per 12, 2008						

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TAN-2-1495.01.US

December 12, 2008



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Our File:

Date:

In the **PATENT APPLICATION** of:

Nelson et al.

Application No.: 09/778,474

Confirmation No.: 4700

Filed:

February 7, 2001

For: MINIMAL MAINTENANCE LINK TO

SUPPORT SYCHRONIZATION

Group:

2419

Examiner:

Saba Tsegaye

INFORMATION DISCLOSURE STATEMENT

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Examiner:

Further to Applicants' Duty of Disclosure pursuant to 37 C.F.R. §1.56, Applicants wish to bring to the Examiner's attention the material cited on the enclosed Form PTO-1449.

The listed references include references previously cited in this application.

Newly cited documents are indicated by an asterisk (*) on the enclosed Form PTO
1449. Copies of the newly cited documents are enclosed.

It is respectfully requested that the Examiner consider these documents and return an initialed copy of the Form PTO-1449 indicating consideration of the cited

Applicant: Nelson et al. Application No.: 09/778,474

materials.

Respectfully submitted,

Nelson et al..

Robert D. Leonard

Registration No. 57,204

(215) 568-6400

Volpe and Koenig, P.C. United Plaza, Suite 1600 30 South 17th Street Philadelphia, PA 19103

RDL/pck Enclosures (8)